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Attorney Docket No: 21486-082 DIV 4

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Wands et al.

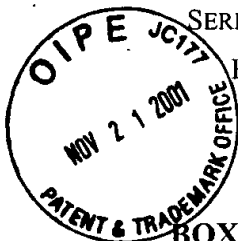
SERIAL NUMBER: 09/903,199

EXAMINER: Not Yet Assigned

FILING DATE: July 11, 2001

ART UNIT: 1642

FOR: Diagnosis and Treatment of Malignant Neoplasms



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Washington, D.C. 20231

INFORMATION DISCLOSURE STATEMENT

Pursuant to the duty of disclosure under 37 C.F.R. §§1.56, 1.97 and 1.98, Applicant hereby makes of record the documents listed on the attached modified Form PTO-1449 (submitted in duplicate) in the above-identified application, copies of which are submitted herewith. The order of presentation of the references should not be construed as an indication of the importance of the references.

This Information Disclosure Statement is being filed before the mailing date of a first Office Action on the merits in the above-identified case. Accordingly, no fee or certification is required as set forth in 37 C.F.R. §1.97.

A copy of each of the above-identified information is enclosed unless otherwise indicated on the attached modified Form PTO-1449. It is respectfully requested that the Examiner consider completely the cited information, along with any other information, in reaching a determination concerning the patentability of the present claims, and signs the enclosed Form PTO-1449 to evidence that the cited information has been fully considered by the PATENT AND TRADEMARK OFFICE during the examination of this application.

Applicants: Wands et al.
U.S.S.N.: 09/903,199

Please charge any additional fees that may be due, or credit any overpayment of same, to
Deposit Account No. 50-0311 (Reference No. 21486-032 DIV 4).

Respectfully submitted,



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Dated: November 21, 2001

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PATENT TRADEMARK OFFICE

TRANSMITTAL LETTER

Transmitted herewith for filing in the present application are the following documents:

1. Information Disclosure Statement (2 pages), in duplicate;
2. Modified Form 1449/PTO (2 pages), in duplicate;
3. Copies of cited references A1, C1-C43;
4. Return Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617) 542-6000, Boston, Massachusetts.

The Commissioner is authorized to charge any additional fees that may be due, or to credit any overpayment, to the undersigned's account, Deposit Account No. 50-0311 Ref. No. 21486-032 DIV 4. A duplicate copy of this transmittal letter is enclosed herewith.

Respectfully submitted,

IA Beattie

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Dated: November 21, 2001

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